Clear Form

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

Denise Cannam

Plaintiff,

vs.

Charles Leslie Anderson

Defendant.

CASE NO. ____________________

APPLICATION TO PROCEED
IN FORMA PAUPERIS
(Non-prisoner cases only)

I, Denise Cannam, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ☐ No ✔

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: ____________________ Net: ____________________

Employer: ____________________

____

If the answer is "no," state the date of last employment and the amount of the gross and net salary and wages per month which you received.

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2. Have you received, within the past twelve (12) months, any money from any of the following sources:

a. Business, Profession or self employment? Yes ☐ No ☐

b. Income from stocks, bonds, or royalties? Yes ☐ No ☐

c. Rent payments? Yes ☐ No ☐

d. Pensions, annuities, or life insurance payments? Yes ☐ No ☐

e. Federal or State welfare payments, Social Security or other government source? Yes ✔ No ☐

If the answer is "yes" to any of the above, describe each source of money and state the amount received from each.

social security supplemental in the amount of $782 a month

food stamps $235 a month

3. Are you married? Yes ✔ No ☐

Spouse's Full Name: James Martin Cannam

Spouse's Place of Employment: In Home Support Services, Sonoma County

Spouse's Monthly Salary, Wages or Income:

Gross $ 455 Net $ 455

4. a. List amount you contribute to your spouse's support:$ we share income

b. List the persons other than your spouse who are dependent upon you for support and indicate how much you contribute toward their support. (NOTE: For minor children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.)

No dependents

5. Do you own or are you buying a home? Yes ☐ No ✔

Estimated Market Value: $ __________ Amount of Mortgage: $ __________

6. Do you own an automobile? Yes ✔ No ☐

Make Ford Year 1990 Model Bronco

Is it financed? Yes ☐ No ✔ If so, Total due: $ __________

Monthly Payment: $ __________

7. Do you have a bank account? Yes ✔ No ☐ (Do not include account numbers.)

Name(s) and address(es) of bank: Exchange Bank

116 S Cloverdale Blvd, Cloverdale, CA 95425

Present balance(s): $ 67.00

Do you own any cash? Yes ✔ No ☐ Amount: $ 20.00

Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes ✔ No ☐

my husband has some non-running vehicles $1,500, Husband's IRA$3,000

8. What are your monthly expenses?

Rent: $ 650 Utilities: 88

Food: $ 400 Clothing: 30

Charge Accounts:

Name of Account	Monthly Payment	Total Owed on This Account
	$	$
	$	$
	$	$

9. Do you have any other debts? (List current obligations, indicating amounts and to whom they are payable. Do not include account numbers.)

Husband owes $400 on his Wells Fargo Visa

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10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes ☐ No ✔

Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in which they were filed.

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I declare under the penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

5/12/2017 /s/ Denise Cannam

DATE SIGNATURE OF APPLICANT